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APPLICATION NUMBER	FILING DATE	CLASS	SUBCLASS	GROUP ART	UNIT	EXAMINER	\neg
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	,	Assistant Examiner	Total Claims	Pr O.	nt Claim for	
ISSUE FEE			DRAWING		_	
Amount Due	Date Paid		Sheets Drwg.	Figs.Drwg.	Print Fig.	
	<u> </u>	Primary Examiner		L	_i	
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